

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

CAMPAIGN FOR WORKING FAMILIES

ADDRESS (number and street)

2800 Shirlington Road, Suite 930

☐ Check if different than previously reported. (ACC)

Arlington

VA

22206

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00325076

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☒ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
04 01 2012

through

M M M / D D D / Y Y Y Y Y Y  
04 30 2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Dorie Velezis

Signature of Treasurer

Dorie Velezis

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
05 17 2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

CAMPAIGN FOR WORKING FAMILIES

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
04 / 01 / 2012 To: M M / D D / Y Y Y Y Y Y  
04 / 30 / 2012

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2012</span>		<span style="border: 1px solid black; padding: 2px;">1278844.43</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">1228662.89</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">56109.68</span>	<span style="border: 1px solid black; padding: 2px;">172873.17</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">1284772.57</span>	<span style="border: 1px solid black; padding: 2px;">1451717.60</span>
7. Total Disbursements (from Line 31) .....	<span style="border: 1px solid black; padding: 2px;">37947.34</span>	<span style="border: 1px solid black; padding: 2px;">204892.37</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<span style="border: 1px solid black; padding: 2px;">1246825.23</span>	<span style="border: 1px solid black; padding: 2px;">1246825.23</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">3841.16</span>	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

CAMPAIGN FOR WORKING FAMILIES

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
04	/	01	/	2012

To:

M M	/	D D	/	Y Y Y Y
04	/	30	/	2012

**I. Receipts**
**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

41510.00

86735.00

(ii) Unitemized .....

4831.08

47070.85

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

46341.08

133805.85

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) .....

46341.08

133805.85

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

18.60

67.32

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3) .....

9750.00

39000.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

9750.00

39000.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

56109.68

172873.17

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

46359.68

133873.17

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	8250.00	37500.00
(ii) Non-Federal Share.....	11250.00	40500.00
(b) Other Federal Operating Expenditures .....	18447.34	77517.37
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	37947.34	155517.37
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	17000.00
24. Independent Expenditures (use Schedule E) .....	0.00	12175.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	200.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	200.00
29. Other Disbursements .....	0.00	20000.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	37947.34	204892.37
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	26697.34	164392.37

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	46341.08	133805.85
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	200.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	46341.08	133605.85
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	26697.34	115017.37
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	26697.34	115017.37

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 43  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**CAMPAIGN FOR WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. MR CHARLES D AYRES**

Mailing Address 4911 CASA ORO DR

City State Zip Code  
 YORBA LINDA CA 92886

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

04 / 12 / 2012

Transaction ID : SA11AI.56598

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. MR KENNETH N BLACKBURN**

Mailing Address 10 SHALLOWBROOK DR

City State Zip Code  
 O FALLON IL 62269

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AIRTRAN AIRWAYS

Occupation

PILOT

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

04 / 24 / 2012

Transaction ID : SA11AI.56543

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. MR WILLIAM P BUCK JR**

Mailing Address 2084 BROOK HIGHLAND RDG

City State Zip Code  
 BIRMINGHAM AL 35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer

UNIVERSITY OF ALABAMA

Occupation

MOM

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

04 / 20 / 2012

Transaction ID : SA11AI.56486

Amount of Each Receipt this Period

100.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

300.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A-N5HCB  
.

Form/Schedule: SA11AI  
Transaction ID : SA11AI.56598  
0103804-0000152

Form/Schedule: SA11AI  
Transaction ID: SA11AI.56543  
0014063-0000093

: 97 `A-G79 @C B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A-N5HCB  
.

Form/Schedule: SA11AI

Transaction ID : SA11AI.56486

0101854-0000030

Form/Schedule:

Transaction ID:



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 9 OF 43

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**CAMPAIGN FOR WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. MR CRAIG W EGLOFF**

Mailing Address 27001 HIGHWAY 128

City

YORKVILLE

State

CA

Zip Code

95494

FEC ID number of contributing  
federal political committee.

C

Name of Employer

JAYMES & JAYMES

Occupation

INSURANCE BROKER

Receipt For: 2012

☐ Primary  
☐ Other (specify) ▼

☒ General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 05 / 2012

**Transaction ID : SA11AI.56603**

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. MR JAMES S ENGLUND**

Mailing Address 302 CINDI CT

City

LONGVIEW

State

TX

Zip Code

75605

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

ENGINEER

Receipt For: 2012

☐ Primary  
☐ Other (specify) ▼

☒ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 10 / 2012

**Transaction ID : SA11AI.56560**

Amount of Each Receipt this Period

400.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. MRS MARGUERITE ENSIO**

Mailing Address 7540 N WINDOW PEAK RD

City

TUCSON

State

AZ

Zip Code

85718

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For: 2012

☐ Primary  
☐ Other (specify) ▼

☒ General

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 02 / 2012

**Transaction ID : SA11AI.56578**

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

5450.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A-N5HCB  
.

Form/Schedule: SA11AI

Transaction ID : SA11AI.56603

0101847-0000157

Form/Schedule: SA11AI

Transaction ID: SA11AI.56560

0014348-0000110

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A=N5HCB  
.

Form/Schedule: SA11AI

Transaction ID : SA11AI.56578

0103782-0000129

Form/Schedule:

Transaction ID:

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

 FOR LINE NUMBER: PAGE 12 OF 43  
 (check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

Full Name (Last, First, Middle Initial)

**A. MR PAAVO ENSIO**

Mailing Address 7540 N WINDOW PEAK RD

 City State Zip Code  
 TUCSON AZ 85718

FEC ID number of contributing federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

ENGINEER

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y  
 04 02 2012

Transaction ID : SA11AI.56579

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. MR FRED B FRANK**

Mailing Address 501 VIA JUAREZ

 City State Zip Code  
 SAN CLEMENTE CA 92673

FEC ID number of contributing federal political committee.

C

Name of Employer

COMFORT MUSIC

Occupation

RECORD PRODUCER

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y  
 04 16 2012

Transaction ID : SA11AI.56595

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. MRS REBECCA E HOMME**

Mailing Address PO BOX 156

 City State Zip Code  
 SPICER MN 56288

FEC ID number of contributing federal political committee.

C

Name of Employer

INFO REQUESTED- NOT RECD

Occupation

INFO REQUESTED- NOT RECD

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y  
 04 12 2012

Transaction ID : SA11AI.56537

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5200.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A-N5HCB  
.

Form/Schedule: SA11AI

Transaction ID : SA11AI.56579

0027682-0000131

Form/Schedule: SA11AI

Transaction ID: SA11AI.56595

0102190-0000149

: 97 `A=G79 @C B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+9A=N5HCB  
.

Form/Schedule: SA11AI

Transaction ID : SA11AI.56537

0108832-0000085

Form/Schedule:

Transaction ID:

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
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PAGE 15 OF 43

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**CAMPAIGN FOR WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. MR FLOYD R JUMP TTE**

Mailing Address 350 E HENSCHEN ST

City  
GARNER

State Zip Code  
IA 50438

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
WIFE

Occupation  
RETIRED

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 27 / 2012

Transaction ID : SA11AI.56525

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. MR HENDRICK KERKSTRA**

Mailing Address 1711 TOURS COURT

City  
BAKERSFIELD

State Zip Code  
CA 93311

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 12 / 2012

Transaction ID : SA11AI.56600

Amount of Each Receipt this Period

60.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. MRS NANCY PHARRIS TTEE**

Mailing Address 174 EMERALD BAY

City  
LAGUNA BEACH

State Zip Code  
CA 92651

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 05 / 2012

Transaction ID : SA11AI.56594

Amount of Each Receipt this Period

200.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

360.00

: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A-N5HCB  
.

Form/Schedule: SA11AI

Transaction ID : SA11AI.56525

0103497-0000073

Form/Schedule: SA11AI

Transaction ID: SA11AI.56600

0108310-0000154



: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A=N5HCB  
.

Form/Schedule: SA11AI

Transaction ID : SA11AI.56594

0103953-0000147

Form/Schedule:

Transaction ID:

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 OF 43  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**CAMPAIGN FOR WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. MRS KATRINA HOFF RAUSCH**

Mailing Address 210 DEMERS LN

City  
POLSON

State Zip Code  
MT 59860

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF

Occupation

HOMEMAKER

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 10 / 2012

Transaction ID : SA11AI.56541

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. MR MIKE D RISINGER**

Mailing Address 421 E GREENWOOD ST

City  
MORTON

State Zip Code  
IL 61550

FEC ID number of contributing  
federal political committee.

C

Name of Employer

IL

Occupation

JUDGE

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 21 / 2012

Transaction ID : SA11AI.56542

Amount of Each Receipt this Period

600.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. MR THOMAS M SEAVER**

Mailing Address 2886 EASTWOOD DR

City  
KIMBALL

State Zip Code  
MI 48074

FEC ID number of contributing  
federal political committee.

C

Name of Employer

THOMAS M SEAVER TRUST

Occupation

RETIRED TEACHER

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 05 / 2012

Transaction ID : SA11AI.56516

Amount of Each Receipt this Period

300.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1150.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A-N5HCB  
.

Form/Schedule: SA11AI  
Transaction ID : SA11AI.56541  
0051716-0000089

Form/Schedule: SA11AI  
Transaction ID: SA11AI.56542  
0103251-0000091

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A=N5HCB  
.

Form/Schedule: SA11AI

Transaction ID : SA11AI.56516

0012537-0000063

Form/Schedule:

Transaction ID:

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 21 OF 43

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**CAMPAIGN FOR WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. MR RICK B SKINNER**

Mailing Address 19111 SCENIC HIGHWAY 98

City State Zip Code  
 FAIRHOPE AL 36532

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

RETIRED ENGINEER

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 30 / 2012

Transaction ID : SA11AI.56489

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. MRS ANITA L ZEISER**

Mailing Address 17 ROCKCREST DR

City State Zip Code  
 SIGNAL MOUNTAIN TN 37377

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 30 / 2012

Transaction ID : SA11AI.56491

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. MR BRUCE C ZEISER**

Mailing Address 1410 TAFT HWY

City State Zip Code  
 SIGNAL MOUNTAIN TN 37377

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SOUTHERN CHAMPION TRAY- LP

Occupation

EXECUTIVE

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 30 / 2012

Transaction ID : SA11AI.56492

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

10050.00

: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+9A-N5HCB  
.

Form/Schedule: SA11AI  
Transaction ID : SA11AI.56489  
0012916-0000033

Form/Schedule: SA11AI  
Transaction ID: SA11AI.56491  
0109561-0000034

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A=N5HCB  
.

Form/Schedule: SA11AI

Transaction ID : SA11AI.56492

0104879-0000036

Form/Schedule:

Transaction ID:

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 OF 43  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**CAMPAIGN FOR WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. MR CHARLES M ZEISER**

Mailing Address 510 ROLLING WAY

City State Zip Code  
 SIGNAL MOUNTAIN TN 37377

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 SOUTHERN CHAMPION TRAY LP

Occupation  
 CHAIRMAN OF THE BOARD

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 30 2012

Transaction ID : SA11AI.56494

Amount of Each Receipt this Period

4000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. JOANNE ZEISER**

Mailing Address 510 ROLLING WAY

City State Zip Code  
 SIGNAL MOUNTAIN TN 37377

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 HOMEMAKER

Occupation  
 HOMEMAKER

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 30 2012

Transaction ID : SA11AI.56496

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. MR JOHN ZEISER**

Mailing Address 17 ROCK CREST DR

City State Zip Code  
 SIGNAL MOUNTAIN TN 37377

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 SOUTHERN CHAMPION TRAY LP

Occupation  
 MANUFACTURER

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 30 2012

Transaction ID : SA11AI.56495

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

14000.00



: 97 `A-G79 @C B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+9A-N5HCB  
.

Form/Schedule: SA11AI  
Transaction ID : SA11AI.56494  
0109563-0000038

Form/Schedule: SA11AI  
Transaction ID: SA11AI.56496  
0072277-0000042

: 97 `A=G79 @C B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A=N5HCB  
.

Form/Schedule: SA11AI

Transaction ID : SA11AI.56495

0100236-0000040

Form/Schedule:

Transaction ID:

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 OF 43  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**CAMPAIGN FOR WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. MRS REGINA S ZEISER**

Mailing Address 1410 TAFT HWY

City State Zip Code  
 SIGNAL MOUNTAIN TN 37377

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 30 / 2012

Transaction ID : SA11AI.56498

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

5000.00

41510.00

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+9A=N5HCB  
.

Form/Schedule: SA11AI

Transaction ID : SA11AI.56498

0109562-0000044

Form/Schedule:

Transaction ID:

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

# CAMPAIGN FOR WORKING FAMILIES

57.69

1350.00

7.95

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

# CAMPAIGN FOR WORKING FAMILIES

Diagram showing three 16-pin D-sub connectors. The first connector is labeled '04' and has pins M, M, and M. The second connector is labeled '05' and has pins D, D, and D. The third connector is labeled '2012' and has pins Y, Y, Y, and Y.

Category/  
Type

0.96

M M / D D / Y Y Y Y  
04 05 2012

Category/  
Type

205.82

Three 7-segment displays are shown, each with a different number of segments lit. The first display shows '04' with 4 segments lit. The second display shows '04' with 4 segments lit. The third display shows '2012' with 12 segments lit.

Category/  
Type

49.01

255.79

**TOTAL** This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 31 OF 43

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**CAMPAIGN FOR WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. BB&T**

Mailing Address P.O. Box 580363

City Charlotte    State NC    Zip Code 28258

Purpose of Disbursement  
BANK FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:    District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 16 / 2012
**Transaction ID : SB21B.56621**

Amount of Each Disbursement this Period

1894.05

Full Name (Last, First, Middle Initial)

**B. CHOI COMPANIES**

Mailing Address 5999 STEVENSON AVE #310

City ALEXANDRIA    State VA    Zip Code 22304

Purpose of Disbursement  
RENT

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:    District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 23 / 2012
**Transaction ID : SB21B.56647**

Amount of Each Disbursement this Period

3090.25

Full Name (Last, First, Middle Initial)

**C. COVAD COMMUNICATIONS**

Mailing Address P.O. BOX 39000

City SAN FRANCISCO    State CA    Zip Code 94139

Purpose of Disbursement  
COMPUTER SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:    District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 03 / 2012
**Transaction ID : SB21B.56629**

Amount of Each Disbursement this Period

114.18

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5098.48

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

# CAMPAIGN FOR WORKING FAMILIES

### A. COVINGTON & BURLING

Date of Disbursement

Transaction ID : SB21B.56636

Category/  
Type

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Amount of Each Disbursement this Period

459.00

## B. FEDERAL EXPRESS

Date of Disbursement

04 / 03 / 2012

Transaction ID : SB21B.56632

Category/  
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Amount of Each Disbursement this Period

37.30

### C. FEDERAL EXPRESS

Date of Disbursement

Three digital displays are shown, each with a date format. The first display shows '04' with two small squares above it. The second display shows '23' with two small squares above it. The third display shows '2012' with four small squares above it.

Transaction ID : SB21B.56637

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Amount of Each Disbursement this Period

56.27

552.57

[illegible]



<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

## CAMPAIGN FOR WORKING FAMILIES

### A. HELLER INFORMATION SERVICES

Date of Disbursement

Transaction ID : SB21B.56638

Category/  
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Amount of Each Disbursement this Period

751.50

## B. INTEGRAM

Date of Disbursement

MM / DD / YYYY

City	State	Zip Code
FAIRFAX	VA	22031

Transaction ID : SB21B.56648

Category/  
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Amount of Each Disbursement this Period

2870.79

### C. IRON MOUNTAIN

Date of Disbursement

Three digital displays are shown, each with a date format. The first display shows '04' with two small squares above it. The second display shows '23' with two small squares above it. The third display shows '2012' with four small squares above it.

City	State	Zip Code
BOSTON	MA	02111

Transaction ID : SB21B.56639

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Amount of Each Disbursement this Period

285.32

3907.61

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 34 OF 43

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**CAMPAIGN FOR WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. LEXIS NEXIS**

Mailing Address P.O. BOX 7247-7090

City PHILADELPHIA      State PA      Zip Code 19170

Purpose of Disbursement  
DUES & SUBSCRIPTIONS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04      23      2012
**Transaction ID : SB21B.56640**

Amount of Each Disbursement this Period

350.00

Full Name (Last, First, Middle Initial)

**B. LPS**

Mailing Address P.O. BOX 2325

City FAIRFAX      State VA      Zip Code 22031

Purpose of Disbursement  
PAC DATA PROCESSING SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04      03      2012
**Transaction ID : SB21B.56651**

Amount of Each Disbursement this Period

1002.03

Full Name (Last, First, Middle Initial)

**C. LPS**

Mailing Address P.O. BOX 2325

City FAIRFAX      State VA      Zip Code 22031

Purpose of Disbursement  
PAC - DATA PROCESSING SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04      23      2012
**Transaction ID : SB21B.56653**

Amount of Each Disbursement this Period

172.18

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1524.21

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

## CAMPAIGN FOR WORKING FAMILIES

250.56



2429.00

2854.56

The diagram shows a rectangular frame with 12 vertical members and 2 horizontal members. A cross-section of a member is shown, indicating a rectangular shape with a central void.

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

## CAMPAIGN FOR WORKING FAMILIES

**A. U.S. POSTMASTER**

Category/  
Type

State:  District:

## B. VERIZON

Category/  
Type

450.88

State:  District:

**C. DEAN VIRAG**

Category/  
Type

500.00

State:  District:

1450.88

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 37 OF 43

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**CAMPAIGN FOR WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. WASHINGTON INTELLIGENCE BUREAU**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		23		2012

Mailing Address 4128 PEPSI PLACE

**Transaction ID : SB21B.56649**

City	State	Zip Code
CHANTILLY	VA	20151

Amount of Each Disbursement this Period

Purpose of Disbursement  
PAC - CAGING AND DATA ENTRY SERVICESCategory/  
Type

609.56

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

**B. WEST**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		03		2012

Mailing Address P.O. BOX 6292

**Transaction ID : SB21B.56633**

City	State	Zip Code
CAROL STREAM	IL	60197

Amount of Each Disbursement this Period

Purpose of Disbursement  
DUES & SUBSCRIPTIONSCategory/  
Type

363.30

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

**C. WEST**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		23		2012

Mailing Address P.O. BOX 6292

**Transaction ID : SB21B.56646**

City	State	Zip Code
CAROL STREAM	IL	60197

Amount of Each Disbursement this Period

Purpose of Disbursement  
DUES & SUBSCRIPTIONSCategory/  
Type

228.90

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

**SUBTOTAL** of Disbursements This Page (optional)..... ►

1201.76

**TOTAL** This Period (last page this line number only)..... ►

18261.50

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 38 OF 43

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**CAMPAIGN FOR WORKING FAMILIES**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**DIRECTECH**

Nature of Debt (Purpose):

CAGING AND DATA PROCESSING

Mailing Address 8595 GROVEMONT CIRCLE

City State

Zip Code

GAITHERSBURG

MD

20877

Outstanding Balance Beginning This Period

223.11

Transaction ID : SD10.4694

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

223.11

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**LPS**

Nature of Debt (Purpose):

PAC DATA PROCESSING SERVICES

Mailing Address P.O. BOX 2325

City State

Zip Code

FAIRFAX

VA

22031

Outstanding Balance Beginning This Period

1174.21

Transaction ID : SD10.56453

Amount Incurred This Period

0.00

Payment This Period

1174.21

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**LPS**

Nature of Debt (Purpose):

PAC - DATA PROCESSING SERVICES

Mailing Address P.O. BOX 2325

City  
FAIRFAXState  
VAZip Code  
22031

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.56652

Amount Incurred This Period

250.56

Payment This Period

250.56

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

223.11

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

0.00

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 39 OF 43

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**CAMPAIGN FOR WORKING FAMILIES**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**LPS**

Nature of Debt (Purpose):

**PAC - DATA PROCESSING SERVICES**

Mailing Address P.O. BOX 2325

City State

FAIRFAX

Zip Code

VA

22031

Outstanding Balance Beginning This Period

0.00

Transaction ID : **SD10.56655**

Amount Incurred This Period

513.03

Payment This Period

0.00

Outstanding Balance at Close of This Period

513.03

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**MWM DIRECT MARKETING SERVICES**

Nature of Debt (Purpose):

**PAC - DIRECT MAIL**

Mailing Address 8048 HILLRISE COURT

City State

ELKRIDGE

Zip Code

MD

21075

Outstanding Balance Beginning This Period

2320.90

Transaction ID : **SD10.4696**

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2320.90

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**WASHINGTON INTELLIGENCE BUREAU**

Nature of Debt (Purpose):

**PAC CAGING AND DATA ENTRY SERVICES**

Mailing Address 4128 PEPSI PLACE

City

CHANTILLY

State

VA

Zip Code

20151

Outstanding Balance Beginning This Period

609.56

Transaction ID : **SD10.56454**

Amount Incurred This Period

0.00

Payment This Period

609.56

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

2833.93

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

0.00

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 40 OF 43

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**CAMPAIGN FOR WORKING FAMILIES**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**WASHINGTON INTELLIGENCE BUREAU**

Nature of Debt (Purpose):

**PAC - CAGING AND DATA ENTRY  
SERVICES**

Mailing Address 4128 PEPSI PLACE

City State

Zip Code

CHANTILLY

VA

20151

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.56656

Amount Incurred This Period

784.12

Payment This Period

0.00

Outstanding Balance at Close of This Period

784.12

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

784.12

2) **TOTALS** This Period (last page this line number only)..... ►

3841.16

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

3841.16



**SCHEDULE H1 (FEC Form 3X)****METHOD OF ALLOCATION FOR:**

- **ALLOCATED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **ALLOCATED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES** (State, District and Local Party Committees Only)
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)** (Separate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)  
CAMPAIGN FOR WORKING FAMILIES

Transaction ID : H1.56660

**USE ONLY ONE SECTION, A or B****A. State and Local Party Committees****Fixed Percentage (select one)**

- \_\_\_\_\_ Presidential-Only Election Year (28% Federal)
- \_\_\_\_\_ Presidential and Senate Election Year (36% Federal)
- \_\_\_\_\_ Senate-Only Election Year (21% Federal)
- \_\_\_\_\_ Non-Presidential and Non-Senate Election Year (15% Federal)

**B. Separate Segregated Funds and Nonconnected Committees****Flat Minimum Federal Percentage**

If the committee will allocate using the flat minimum percentage of 50% federal funds, check ☒ **or**

If the committee is spending more than 50% federal funds, indicate ratio below

Federal.....  %

Nonfederal .....  %

This ratio applies to (check all that apply):

Administrative ☒ Generic Voter Drive ☐ Public Communications Referencing Party Only ☐

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 42 OF 43

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)  
CAMPAIGN FOR WORKING FAMILIESNAME OF ACCOUNT  
CAMPAIGN FOR WORKING FAMILIES

DATE OF RECEIPT

MM / DD / YYYY  
04 / 24 / 2012

TOTAL AMOUNT TRANSFERRED

9750.00

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

9750.00

Transaction ID : H3.56659

ii) Generic Voter Drive .....

iii) Exempt Activities.....

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Fundraising .....

v) Direct Candidate Support (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Candidate Support.....

vi) Public Communications Referring Only to Party (Made by PAC) .....

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

9750.00

TOTAL This Period (Generic Voter Drive) .....

0.00

TOTAL This Period (Exempt Activities) .....

0.00

TOTAL This Period (Direct Fundraising) .....

0.00

TOTAL This Period (Direct Candidate Support) .....

0.00

TOTAL This Period (Public Communications Referring Only to Party) .....

0.00

TOTAL This Period (Total Amount Transferred).....

9750.00

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 43 OF 43

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**CAMPAIGN FOR WORKING FAMILIES**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>GARY BAUER</b>		<b>Transaction ID : H4.56625</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2800 SHIRLINGTON ROAD #930					
City ARLINGTON	State VA	Zip Code 22206			
Purpose of Disbursement: PAC CONSULTING POLITICAL AND ADMIN				Allocated Activity or Event Year-To-Date 72000.00	
Activity or Event Identifier: <b>Administrative</b>		Category/ Type		Date 04 / 27 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
6750.00			6750.00		13500.00

<b>B. Full Name (Last, First, Middle Initial)</b> <b>BILL MOELLER</b>		<b>Transaction ID : H4.56626</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2800 SHIRLINGTON ROAD #930					
City ARLINGTON	State VA	Zip Code 22206			
Purpose of Disbursement: PAC CONSULTING RESEARCHER/WRITER				Allocated Activity or Event Year-To-Date 75000.00	
Activity or Event Identifier: Administrative		Category/ Type		Date 04 / 27 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
0.00			3000.00		3000.00

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Dorie Velezis</b>		<b>Transaction ID : H4.56627</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2800 S. Shirlington Road, #930					
City Arlington	State VA	Zip Code 22206			
Purpose of Disbursement: ACCOUNTING SERVICES				Allocated Activity or Event Year-To-Date 78000.00	
Activity or Event Identifier: Administrative		Category/ Type		Date 04 / 27 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
1500.00			1500.00		3000.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8250.00		11250.00		19500.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
8250.00	11250.00	19500.00